



Uterocervical Prolapse in Labour

Neetu Sangwan, Nidhi Rajotia, Nirmala Duhan, Daya Sirohiwal, Neha Khaneja

Uterocervical prolapse complicating pregnancy is extremely rare with an estimated incidence of 1 per 10,000-15,000 deliveries (1). The reported complications that result from cervical prolapse during pregnancy are minor cervical desiccation and ulceration, spontaneous abortion, preterm labor, premature delivery, fetal demise, maternal sepsis, urinary tract infection, acute urinary retention and dystocia (2,3). Various predisposing factors for this morbid condition are congenital or developmental weakness of supporting structures, injury sustained during childbirth and menopause. Congenital or developmental weakness of supports is the most important of all factors and it operates in nulliparous as well as multiparous prolapse. It may explain why prolapse often follows easy rather than difficult labor, the inherent weakness of the fibro muscular tissues allowing rapid dilatation of the birth canal as well as subsequent prolapse (4). One pregnancy and vaginal delivery can weaken the area enough to lead to prolapse eventually, especially if the birth was traumatic such as a prolonged intense pushing stage and not allowing tissues to stretch gradually. Management options for cervical prolapse in labor are: local application of magnesium sulphate, manual stretching of cervix during uterine contractions or duhrssens incisions on cervix (5).

We present a very rare case of utero cervical prolapse occurring for the first time during labor. A 27 years old gravida 2, para 1 was referred with history of labor pains since 18 hours, leaking per vaginum since 12 hours and some tissue protruding at the vaginal introitus since 2 hours. Obstetric history revealed first full term vaginal delivery following 4-5 hours labor delivering a healthy female baby of 3 kg. She had her routine antenatal checkup 1 week back which revealed 36 weeks sized uterus with single live fetus in cephalic presentation and adequate liquor. As per her referral slip, there was arrest of cervical dilatation since last 6-7 hours despite good uterine contractions. The findings from her general physical examination were normal except for mild anemia. On per abdomen examination, uterus was 30 weeks by fundal height, fetal parts were palpable and uterine contractions were of good intensity. Fetal heart sound was not localized. Local examination revealed about 15 cm long cervix protruding outside the introitus, 6 cm dilated and fetal scalp visible (Fig.1). Delivery was completed



Fig1 & 2 Shows Utero Cervical Prolapse in Labor & Stitched Dührssen Incision on Cervix



Fig 3. Shows 1st° Nulliparous Prolapse, 12 hrs of Delivery by giving duhrssen incision on cervix at 2 o'clock position. She delivered a healthy female baby of 2.7 kg followed by delivery of placenta. Immediately after delivery, cervix was lying about 3 inches outside the introitus (Fig 2). About 12 hours postpartum, she had first degree nulliparous prolapse (Fig 3). She was discharged after 72 hours in a good condition. Follow up visit at 6 weeks postpartum revealed only first degree nulliparous prolapse.

References

1. Daskalakis G, Lymberopoulos E, Anastasakis E *et al*. Uterine prolapse complicating pregnancy. *Arch Gynecol Obstet* 2007; 276: 391-92.
2. Sawyer D, Frey K. Cervical prolapses during prolapse. *J Am Board Fam Pract* 1999; 13: 216-18.
3. Yogev Y, Horowitz ER, Ben-Haroush A, *et al*. Uterine cervical elongation and prolapse during pregnancy: an old unsolved problem. *Clin Exp Obstet Gynecol* 2003; 30:183-85.
4. Bhatla N. Pelvic organ prolapse. In: Jeff Coates Principles of Gynecology 5th ed. London, Arnold Publisher. 2001; .pp.270-71.
5. Dutta DC. Gynecological disorders in pregnancy. In: Textbook of obstetrics 6th ed. India, New Central Book Agency (p) Ltd. 2004; .pp.313.

From the Department of Obstetrics and Gynecology, Pt. B.D.Sharma, University of Health Sciences, Rohtak (Haryana)-India
Correspondence to : Dr. Neetu Sangwan, Aastha Hospital 223/22, Vikas Nagar-Rohtak, Haryana-India